

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

1 2 F E 4 M 5

Jerry Carl for Congress

ADDRESS (number and street)

PO Box 852138

Check if different
than previously
reported. (ACC)

Mobile

AL

36685

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00697789

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

AL

01

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Frenkel, Ceresa, M, ,

Type or Print Name of Treasurer

Signature of Treasurer

Frenkel, Ceresa, M, ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 64

Write or Type Committee Name
Jerry Carl for Congress

Report Covering the Period:

From:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 0 | 1 | | 2 | 0 | 1 | 9 |

To:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 3 | 1 | | 2 | 0 | 1 | 9 |

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 57725.00 | 509209.10 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 0.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | 57725.00 | 509209.10 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 156080.74 | 271256.93 |
| (b) Total Offsets to Operating Expenditures (from Line 14) | 0.00 | 0.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) | 156080.74 | 271256.93 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | 692952.17 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 455000.00 | |

For further information contact:

Federal Election Commission
 999 E Street, NW
 Washington, DC 20463

Toll Free 800-424-9530
 Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

PAGE 3 / 64

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Jerry Carl for Congress

Report Covering the Period:

From:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 0 | 1 | | 2 | 0 | 1 | 9 |

To:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 3 | 1 | | 2 | 0 | 1 | 9 |

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees**

(i) Itemized (use Schedule A).....

50785.00

484984.00

(ii) Unitemized.....

4440.00

13869.60

(iii) TOTAL of contributions from individuals ▶

55225.00

498853.60

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

2500.00

8700.00

(d) The Candidate.....

0.00

1655.50

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

57725.00

509209.10

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

50000.00

455000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

50000.00

455000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

107725.00

964209.10

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 64

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 156080.74 | 271256.93 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 0.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 156080.74 | 271256.93 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 741307.91 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 107725.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 849032.91 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 156080.74 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 692952.17 |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 64

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
ABRAHAM, ALEX, , ,

Mailing Address 7292 SABLE PALM DR

| | | |
|----------------|-------------|------------------------|
| City MOBILE | State AL | Zip Code 36695-5523 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------|-----------------------|
| Name of Employer RETIRED | Occupation RETIRED |
|-----------------------------|-----------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 12 2019

Transaction ID : SA11A.691

Amount of Each Receipt this Period

400.00

☐ Memo Item
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ABRAHAM, ANN, , ,

Mailing Address 7292 SABLE PALMS DR

| | | |
|----------------|-------------|------------------------|
| City MOBILE | State AL | Zip Code 36695-5523 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-------------------------|-------------------------|
| Name of Employer N/A | Occupation HOMEMAKER |
|-------------------------|-------------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 12 2019

Transaction ID : SA11A.686

Amount of Each Receipt this Period

400.00

☐ Memo Item
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ALVIS, BURNICE, THEODORE, ,

Mailing Address 10700 SHEFFIELD RD

| | | |
|----------------|-------------|------------------------|
| City MOBILE | State AL | Zip Code 36695-8059 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|------------------------|-----------------------|
| Name of Employer NA | Occupation RETIRED |
|------------------------|-----------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 12 2019

Transaction ID : SA11A.682

Amount of Each Receipt this Period

200.00

☐ Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
ASKEW, CHARLES, , ,

Mailing Address 24722 GULF BAY RD

| | | |
|----------------------|-------------|------------------------|
| City ORANGE BEACH | State AL | Zip Code 36561-3852 |
|----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--------------------------|-----------------------|
| Name of Employer SELF | Occupation REALTOR |
|--------------------------|-----------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 22 / 2019

Transaction ID : SA11A.650

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BARCLIFT, MATTHEW, , ,

Mailing Address 205 COSGROVE DRIVE

| | | |
|----------------|-------------|------------------------|
| City MOBILE | State AL | Zip Code 36608-2762 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------------|------------------------|
| Name of Employer MOBILE COUNTY | Occupation ENGINEER |
|-----------------------------------|------------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2019

Transaction ID : SA11A.751

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BARNHILL, C WILLIAM, , , PH.D.

Mailing Address 39 SIGNAL HILL RD

| | | |
|----------------------|-------------|------------------------|
| City SPANISH FORT | State AL | Zip Code 36527-3139 |
|----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--------------------------------------|-------------------------|
| Name of Employer OMEGA PROPERTIES | Occupation PRESIDENT |
|--------------------------------------|-------------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 22 / 2019

Transaction ID : SA11A.631

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1525.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
BARNHILL, CHARLES, , ,

Mailing Address 39 SIGNAL HILL ROAD

| | | |
|----------------------|-------------|------------------------|
| City SPANISH FORT | State AL | Zip Code 36527-3139 |
|----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-------------------------|-----------------------------|
| Name of Employer N/A | Occupation SELF EMPLOYED |
|-------------------------|-----------------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 15 / 2019

Transaction ID : SA11A.666

Amount of Each Receipt this Period

1000.00

☐ Memo Item
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BARTON, JEFF, , ,

Mailing Address 5605 JAMES MADISON DRIVE SOUTH

| | | |
|----------------|-------------|------------------------|
| City MOBILE | State AL | Zip Code 36693-4033 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------------|---------------------|
| Name of Employer SELF EMPLOYED | Occupation SALES |
|-----------------------------------|---------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 25 / 2019

Transaction ID : SA11A.673

Amount of Each Receipt this Period

800.00

☐ Memo Item
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BEEBE, DONALD, G., ,

Mailing Address 3030 KNOLLWOOD DR

| | | |
|----------------|-------------|------------------------|
| City MOBILE | State AL | Zip Code 36693-7002 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---------------------------------------|------------------------|
| Name of Employer THE ATCHISON FIRM | Occupation ATTORNEY |
|---------------------------------------|------------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 05 / 2019

Transaction ID : SA11A.706

Amount of Each Receipt this Period

800.00

☐ Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2600.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
BENTON, THOMAS, H., , JR.

Mailing Address 808 BRIGHTON PL

| | | |
|----------------|-------------|------------------------|
| City MOBILE | State AL | Zip Code 36693-2931 |
|----------------|-------------|------------------------|

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
REALTOR

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 11 / 22 / 2019 |

Transaction ID : SA11A.637

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BOCK, CYNTHIA, , ,

Mailing Address 7430 HITT ROAD

| | | |
|----------------|-------------|------------------------|
| City MOBILE | State AL | Zip Code 36695-4438 |
|----------------|-------------|------------------------|

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAOccupation
HOMEMAKER

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 12 / 30 / 2019 |

Transaction ID : SA11A.698

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BRELAND, BUDDY, , ,

Mailing Address P.O. BOX 1142

| | | |
|---------------------|-------------|------------------------|
| City POINT CLEAR | State AL | Zip Code 36564-1142 |
|---------------------|-------------|------------------------|

FEC ID number of contributing
federal political committee.

C

Name of Employer
BRELAND CORPOccupation
OWNER

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 12 / 30 / 2019 |

Transaction ID : SA11A.699

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶

2500.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
BRETT, JOHN, , ,

Mailing Address 24325 PERDIDO BEACH BLVD

| | | |
|----------------------|-------------|------------------------|
| City ORANGE BEACH | State AL | Zip Code 36561-6097 |
|----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|------------------------------------|-------------------|
| Name of Employer BRETT ROBINSON | Occupation CEO |
|------------------------------------|-------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 22 / 2019

Transaction ID : SA11A.643

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CARL, TINA, , ,

Mailing Address 12451 AIRPORT BOULEVARD

| | | |
|----------------|-------------|------------------------|
| City MOBILE | State AL | Zip Code 36608-8723 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|-------------------|
| Name of Employer ECM HOME HEALTH SERVICES, INC. | Occupation CEO |
|--|-------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2019

Transaction ID : SA11A.702

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CLEMENT, THOMAS, B., , SR.

Mailing Address P.O. BOX 160087

| | | |
|----------------|-------------|------------------------|
| City MOBILE | State AL | Zip Code 36616-1087 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-------------------------|-----------------------------|
| Name of Employer N/A | Occupation SELF EMPLOYED |
|-------------------------|-----------------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 22 / 2019

Transaction ID : SA11A.644

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

1600.00

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 64

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
CONSTANTINE, KAMAL, , ,

Mailing Address 7537 WILLOW CR .37

| | | |
|----------------|-------------|------------------------|
| City MOBILE | State AL | Zip Code 36695-4490 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------------|------------------------------|
| Name of Employer PIGGLY WIGGLY | Occupation GENERAL MANGER |
|-----------------------------------|------------------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 13 2019

Transaction ID : SA11A.708

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
COSTANTINI, ROBERT, , ,

Mailing Address 2200 US HIGHWAY 98
 SUITE 4

| | | |
|----------------|-------------|------------------------|
| City DAPHNE | State AL | Zip Code 36526-4382 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---------------------|
| Name of Employer SYCAMORE CONSTRUCTION | Occupation OWNER |
|---|---------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 02 2019

Transaction ID : SA11A.704

Amount of Each Receipt this Period

1800.00

☐ Memo Item
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DORLAND, JOHN, E., ,

Mailing Address 28320 BURKART RD

| | | |
|----------------------|-------------|------------------------|
| City ORANGE BEACH | State AL | Zip Code 36561-4338 |
|----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------------|----------------------|
| Name of Employer SELF-EMPLOYED | Occupation FARMER |
|-----------------------------------|----------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 30 2019

Transaction ID : SA11A.711

Amount of Each Receipt this Period

1000.00

☐ Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 64

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
ELCAN, DANIEL, G., ,

Mailing Address 3601 SPRING HILL BUSINESS PARK
 SUITE 201

City MOBILE State AL Zip Code 36608-1263

FEC ID number of contributing federal political committee. **C**

Name of Employer ELCAN INC Occupation SELF EMPLOYED

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 30 2019

Transaction ID : SA11A.695

Amount of Each Receipt this Period

1000.00

☐ Memo Item
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FAVRE, ART, E., ,

Mailing Address P.O. BOX 82285

City BATON ROUGE State LA Zip Code 70884-2285

FEC ID number of contributing federal political committee. **C**

Name of Employer THE WHARF Occupation OWNER

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 15 2019

Transaction ID : SA11A.607

Amount of Each Receipt this Period

2800.00

☐ Memo Item
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FLYNT, KELLE, , ,

Mailing Address 5370 ELGIN DRIVE W

City GRAND BAY State AL Zip Code 36541-3272

FEC ID number of contributing federal political committee. **C**

Name of Employer MOBILE COUNTY Occupation SECRETARY

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 25 2019

Transaction ID : SA11A.709

Amount of Each Receipt this Period

200.00

☐ Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
GILL, JOHN, , ,
Mailing Address 16288 N SHORE DR

City
PENSACOLA

State
FL

Zip Code
32507-8305

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
REALTOR

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 22 2019

Transaction ID : SA11A.634

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HARRISON, LAMAR, A.LLEN, ,
Mailing Address P.O. BOX 143

City
WILMER

State
AL

Zip Code
36587-0143

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
ATTORNEY

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 30 2019

Transaction ID : SA11A.714

Amount of Each Receipt this Period

1800.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HUDDLESTON, VIRGINIA, , ,
Mailing Address 3480 SEMMES WOODS DR

City
SEMMES

State
AL

Zip Code
36575-6163

FEC ID number of contributing
federal political committee.

C

Name of Employer
PUBLIC HOUSING

Occupation
MANAGER

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 15 2019

Transaction ID : SA11A.613

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3050.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
KIDD, ROLAND, , ,

Mailing Address 11606 COUNTY RD 54

| | | |
|----------------|-------------|------------------------|
| City DAPHNE | State AL | Zip Code 36526-8408 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------|-----------------------|
| Name of Employer RETIRED | Occupation RETIRED |
|-----------------------------|-----------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 28 2019

Transaction ID : SA11A.606

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KIDD, ROLAND, , ,

Mailing Address 11606 COUNTY RD 54

| | | |
|----------------|-------------|------------------------|
| City DAPHNE | State AL | Zip Code 36526-8408 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------|-----------------------|
| Name of Employer RETIRED | Occupation RETIRED |
|-----------------------------|-----------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 22 2019

Transaction ID : SA11A.646

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KIDD, ROLAND, , ,

Mailing Address 11606 COUNTY RD 54

| | | |
|----------------|-------------|------------------------|
| City DAPHNE | State AL | Zip Code 36526-8408 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------|-----------------------|
| Name of Employer RETIRED | Occupation RETIRED |
|-----------------------------|-----------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 12 2019

Transaction ID : SA11A.687

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
KING, CHRIS, , ,
Mailing Address 208 S GEORGIA AVE

City State Zip Code
MOBILE AL 36604-2314

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROBERTS BROTHERS

Occupation
SALES

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 28 2019

Transaction ID : SA11A.605

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LEE, THOMAS, , ,
Mailing Address 1311 EAST FAIRWAY DRIVE

City State Zip Code
GULF SHORES AL 36542-4303

FEC ID number of contributing
federal political committee.

C

Name of Employer
VULCAN INC

Occupation
CEO

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 30 2019

Transaction ID : SA11A.710

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LUKER, WILLIAM, G., ,
Mailing Address P.O. BOX 365

City State Zip Code
SARALAND AL 36571-0365

FEC ID number of contributing
federal political committee.

C

Name of Employer
SPEAKS & ASSOCIATES

Occupation
PRESIDENT

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2019

Transaction ID : SA11A.731

Amount of Each Receipt this Period

1200.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
MAISEL, ELLIOT, B., ,

Mailing Address 3378 MOFFETT ROAD

| | | |
|----------------|-------------|------------------------|
| City MOBILE | State AL | Zip Code 36607-1708 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---------------------------------------|-------------------|
| Name of Employer GULF DISTRIBUTING | Occupation CEO |
|---------------------------------------|-------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 22 2019

Transaction ID : SA11A.647

Amount of Each Receipt this Period

2500.00

☐ Memo Item
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MAISEL, NELL, , ,

Mailing Address 117 PINEBROOK DR W

| | | |
|----------------|-------------|--------------------|
| City MOBILE | State AL | Zip Code 36608- |
|----------------|-------------|--------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|------------------------|-------------------------|
| Name of Employer NA | Occupation HOMEMAKER |
|------------------------|-------------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 12 2019

Transaction ID : SA11A.674

Amount of Each Receipt this Period

2500.00

☐ Memo Item
 CONTRIBUTION

SEE REDESIGNATION

C. Full Name (Last, First, Middle Initial)
MAISEL, NELL, , ,

Mailing Address 117 PINEBROOK DR W

| | | |
|----------------|-------------|--------------------|
| City MOBILE | State AL | Zip Code 36608- |
|----------------|-------------|--------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|------------------------|-------------------------|
| Name of Employer NA | Occupation HOMEMAKER |
|------------------------|-------------------------|

Receipt For: 2020
☐ Primary ☐ General
☒ Other (specify) ▼ RUNOFF

Election Cycle-to-Date ▼
 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 12 2019

Transaction ID : SA11A.675

Amount of Each Receipt this Period

2200.00

☒ Memo Item
 CONTRIBUTION

REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
MAISEL, NELL, , ,
Mailing Address 117 PINEBROOK DR W

City State Zip Code
MOBILE AL 36608-

FEC ID number of contributing
federal political committee.

C

Name of Employer
NA

Occupation
HOMEMAKER

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 12 2019

Transaction ID : SA11A.688

Amount of Each Receipt this Period

- 2200.00

☒ Memo Item
CONTRIBUTION

REDESIGNATION TO RUNOFF

B. Full Name (Last, First, Middle Initial)
MCKELLAR, CHARLES, E., ,
Mailing Address 2923 RAINES CT

City State Zip Code
MOBILE AL 36605-4129

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
REALTOR

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 22 2019

Transaction ID : SA11A.656

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MCKELLAR, REGINA, L., ,
Mailing Address 2923 RAINES CT

City State Zip Code
MOBILE AL 36605-4129

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
REALTOR

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 22 2019

Transaction ID : SA11A.639

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1000.00

SCHEDULE A (FEC Form 3)
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| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
MISHKIN, JOSEPH, , ,

Mailing Address P.O. BOX 161669

| | | |
|----------------|-------------|------------------------|
| City MOBILE | State AL | Zip Code 36616-2669 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---------------------------------------|-------------------------|
| Name of Employer THE MISHKIN GROUP | Occupation PRESIDENT |
|---------------------------------------|-------------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt

| |
|-----------------------|
| M M / D D / Y Y Y Y Y |
| 11 / 22 / 2019 |

Transaction ID : SA11A.641

Amount of Each Receipt this Period

| |
|---------|
| 1000.00 |
|---------|

☐ Memo Item
CONTRIBUTION

SEE REDESIGNATION

B. Full Name (Last, First, Middle Initial)
MISHKIN, JOSEPH, , ,

Mailing Address P.O. BOX 161669

| | | |
|----------------|-------------|------------------------|
| City MOBILE | State AL | Zip Code 36616-2669 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---------------------------------------|-------------------------|
| Name of Employer THE MISHKIN GROUP | Occupation PRESIDENT |
|---------------------------------------|-------------------------|

Receipt For: 2020
☐ Primary ☐ General
☒ Other (specify) ▼ RUNOFF

Election Cycle-to-Date ▼
3500.00

Date of Receipt

| |
|-----------------------|
| M M / D D / Y Y Y Y Y |
| 11 / 22 / 2019 |

Transaction ID : SA11A.642

Amount of Each Receipt this Period

| |
|--------|
| 700.00 |
|--------|

☒ Memo Item
CONTRIBUTION

REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
MISHKIN, JOSEPH, , ,

Mailing Address P.O. BOX 161669

| | | |
|----------------|-------------|------------------------|
| City MOBILE | State AL | Zip Code 36616-2669 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---------------------------------------|-------------------------|
| Name of Employer THE MISHKIN GROUP | Occupation PRESIDENT |
|---------------------------------------|-------------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt

| |
|-----------------------|
| M M / D D / Y Y Y Y Y |
| 11 / 22 / 2019 |

Transaction ID : SA11A.657

Amount of Each Receipt this Period

| |
|----------|
| - 700.00 |
|----------|

☒ Memo Item
CONTRIBUTION

REDESIGNATION TO RUNOFF

SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

| |
|---------|
| 1000.00 |
|---------|

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
MORAVEC, GREGG, , ,

Mailing Address P.O. BOX 347

| | | |
|------------------|-------------|------------------------|
| City ST. ELMO | State AL | Zip Code 36568-0347 |
|------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------------|----------------------|
| Name of Employer SELF EMPLOYED | Occupation FARMER |
|-----------------------------------|----------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 30 2019

Transaction ID : SA11A.713

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
OWENS, GIGI, , ,

Mailing Address 710 PEAKES POINT DR

| | | |
|---------------------|-------------|------------------------|
| City GULF BREEZE | State FL | Zip Code 32561-4127 |
|---------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------------|-----------------------|
| Name of Employer SELF EMPLOYED | Occupation REALTOR |
|-----------------------------------|-----------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 22 2019

Transaction ID : SA11A.619

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
OWENS, THOMAS, , ,

Mailing Address 710 PEAKES POINT DR

| | | |
|---------------------|-------------|------------------------|
| City GULF BREEZE | State FL | Zip Code 32561-4127 |
|---------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------------|-----------------------|
| Name of Employer SELF EMPLOYED | Occupation RELATOR |
|-----------------------------------|-----------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 22 2019

Transaction ID : SA11A.652

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1500.00

SCHEDULE A (FEC Form 3)
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| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
PLASH, PAIGE, B., ,
Mailing Address 57 MCGREGOR AVE S

| | | |
|----------------|-------------|------------------------|
| City MOBILE | State AL | Zip Code 36608-1823 |
|----------------|-------------|------------------------|

FEC ID number of contributing
federal political committee.

C

Name of Employer
ENCORE REHABOccupation
OWNER

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 30 | | 2019 |

Transaction ID : SA11A.692

Amount of Each Receipt this Period

2800.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PURSELL, DAVID, , ,
Mailing Address 2453 MARBLE VALLEY ROAD

| | | |
|-------------------|-------------|------------------------|
| City SYLACAUGA | State AL | Zip Code 35151-5123 |
|-------------------|-------------|------------------------|

FEC ID number of contributing
federal political committee.

C

Name of Employer
PURSELL FARMSOccupation
CEO

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4700.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 01 | | 2019 |

Transaction ID : SA11A.586

Amount of Each Receipt this Period

2000.00

☐ Memo Item
CONTRIBUTION

SEE REDESIGNATION

C. Full Name (Last, First, Middle Initial)
PURSELL, DAVID, , ,
Mailing Address 2453 MARBLE VALLEY ROAD

| | | |
|-------------------|-------------|------------------------|
| City SYLACAUGA | State AL | Zip Code 35151-5123 |
|-------------------|-------------|------------------------|

FEC ID number of contributing
federal political committee.

C

Name of Employer
PURSELL FARMSOccupation
CEO

Receipt For: 2020
☐ Primary ☐ General
☒ Other (specify) ▼ RUNOFF

Election Cycle-to-Date ▼

4700.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 01 | | 2019 |

Transaction ID : SA11A.587

Amount of Each Receipt this Period

1900.00

☒ Memo Item
CONTRIBUTION

REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|---------|
| 4800.00 |
|---------|

SCHEDULE A (FEC Form 3)
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| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
PURSELL, DAVID, , ,

Mailing Address 2453 MARBLE VALLEY ROAD

| | | |
|-------------------|-------------|------------------------|
| City SYLACAUGA | State AL | Zip Code 35151-5123 |
|-------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------------|-------------------|
| Name of Employer PURSELL FARMS | Occupation CEO |
|-----------------------------------|-------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4700.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 10 / 01 / 2019 |

Transaction ID : SA11A.588

Amount of Each Receipt this Period

- 1900.00

☒ Memo Item

CONTRIBUTION

REDESIGNATION TO RUNOFF

B. Full Name (Last, First, Middle Initial)
PURSELL, TAYLOR, , ,

Mailing Address 4116 ABINGDON LN

| | | |
|----------------------|-------------|------------------------|
| City MOUNTAIN BRK | State AL | Zip Code 35243-1706 |
|----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---------------------|
| Name of Employer PURSELL TECHNOLOGIES | Occupation OWNER |
|--|---------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 12 / 02 / 2019 |

Transaction ID : SA11A.705

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RAMSAY, BRANDY, P., ,

Mailing Address 9533 RAMSEY ROAD

| | | |
|-------------------|-------------|------------------------|
| City GRAND BAY | State AL | Zip Code 36541-5117 |
|-------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-------------------------|-------------------------|
| Name of Employer N/A | Occupation HOMEMAKER |
|-------------------------|-------------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 12 / 12 / 2019 |

Transaction ID : SA11A.681

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

| |
|---------|
| 3000.00 |
|---------|

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 64

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
RAMSAY, LYMAN, M., , JR.

Mailing Address 9533 RAMSEY ROAD

City
GRAND BAYState
ALZip Code
36541-5117FEC ID number of contributing
federal political committee.

C

Name of Employer
CROWDER GULFOccupation
OWNER

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 12 | | 2019 |

Transaction ID : SA11A.689

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBINSON, DEBORAH, , ,

Mailing Address 27580 CANAL RD APT 1433

City
ORANGE BEACHState
ALZip Code
36561-4080FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
REALTOR

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 22 | | 2019 |

Transaction ID : SA11A.629

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBINSON, WILLIAM, , , JR.

Mailing Address 27580 CANAL RD
APT 1433

City
ORANGE BEACHState
ALZip Code
36561-4080FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
REALTOR

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 22 | | 2019 |

Transaction ID : SA11A.630

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶

3500.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
SCHLESINGER, J TUERK, , ,
Mailing Address 57 N BAYVIEW STREET

City State Zip Code
FAIRHOPE AL 36532-2537

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALTA POINTE HEALTHCARE

Occupation
CEO

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 30 2019

Transaction ID : SA11A.712

Amount of Each Receipt this Period

1300.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SHERMAN, JIM, , ,
Mailing Address 1140 WAKEFIELD DR. W.

City State Zip Code
MOBILE AL 36695-8478

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIREHOUSE SUBS

Occupation
OWNER

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2019

Transaction ID : SA11A.752

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SPEAKS, CAROLYN, , ,
Mailing Address 1700 ROCKVIEW CIR

City State Zip Code
MOBILE AL 36695-4394

FEC ID number of contributing
federal political committee.

C

Name of Employer
NA

Occupation
HOMEMAKER

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2019

Transaction ID : SA11A.732

Amount of Each Receipt this Period

1200.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2535.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 64

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
SPRINKLE, MEGAN, , ,

Mailing Address 8031 SHANNON DR N

| | | |
|-------------------|-------------|------------------------|
| City IRVINGTON | State AL | Zip Code 36544-4115 |
|-------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-------------------------------|-------------------------|
| Name of Employer HOMEMAKER | Occupation HOMEMAKER |
|-------------------------------|-------------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 11 / 15 / 2019 |

Transaction ID : SA11A.612

Amount of Each Receipt this Period

| |
|--------|
| 250.00 |
|--------|

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SPRINKLE, WILLIAM, , ,

Mailing Address 8031 SHANNON DR N

| | | |
|-------------------|-------------|------------------------|
| City IRVINGTON | State AL | Zip Code 36544-4115 |
|-------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------------|-----------------------|
| Name of Employer SELF EMPLOYED | Occupation SEAFOOD |
|-----------------------------------|-----------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 11 / 15 / 2019 |

Transaction ID : SA11A.615

Amount of Each Receipt this Period

| |
|--------|
| 250.00 |
|--------|

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STAUTER, JEFF, , ,

Mailing Address 1090 NEWBURY LN E

| | | |
|----------------|-------------|------------------------|
| City MOBILE | State AL | Zip Code 36695-4448 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--------------------------------|--------------------------|
| Name of Employer STATE FARM | Occupation CLAIMS REP |
|--------------------------------|--------------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1425.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 11 / 22 / 2019 |

Transaction ID : SA11A.672

Amount of Each Receipt this Period

| |
|--------|
| 125.00 |
|--------|

☐ Memo Item
CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

| |
|--------|
| 625.00 |
|--------|

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 64

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
STEIN, VICKI, , ,

Mailing Address 25187 WINDWARD PLACE

| | | |
|----------------------|-------------|------------------------|
| City ORANGE BEACH | State AL | Zip Code 36561-6244 |
|----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-------------------------|---------------------------|
| Name of Employer N/A | Occupation REAL ESTATE |
|-------------------------|---------------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 22 / 2019

Transaction ID : SA11A.628

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
STEVENS, DONNA, , ,

Mailing Address 1817 ASBURY LANE

| | | |
|-------------------|-------------|------------------------|
| City DEER PARK | State TX | Zip Code 77536-3656 |
|-------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------|-----------------------|
| Name of Employer RETIRED | Occupation RETIRED |
|-----------------------------|-----------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 12 / 2019

Transaction ID : SA11A.740

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAMS, CHERYL, , ,

Mailing Address 12 SOUTH FLORIDA ST

| | | |
|----------------|-------------|------------------------|
| City MOBILE | State AL | Zip Code 36606-1933 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|------------------------|-------------------------|
| Name of Employer NA | Occupation HOMEMAKER |
|------------------------|-------------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 03 / 2019

Transaction ID : SA11A.589

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 OF 64

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
WIREMAN, JUDY, , ,

Mailing Address P.O. BOX 510

| | | |
|----------------------|-------------|------------------------|
| City ORANGE BEACH | State AL | Zip Code 36561-0510 |
|----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------------|-----------------------|
| Name of Employer CARIBE REALTY | Occupation REALTOR |
|-----------------------------------|-----------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 22 2019

Transaction ID : SA11A.649

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WIREMAN, LARRY, , ,

Mailing Address P.O. BOX 510

| | | |
|----------------------|-------------|------------------------|
| City ORANGE BEACH | State AL | Zip Code 36561-0510 |
|----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------------|-----------------------|
| Name of Employer CARIBE REALTY | Occupation REALTOR |
|-----------------------------------|-----------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 22 2019

Transaction ID : SA11A.658

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WRIGHT, ROBIN, , ,

Mailing Address P.O. BOX 914

| | | |
|------------------------|-------------|------------------------|
| City BAYOU LA BATRE | State AL | Zip Code 36509-0914 |
|------------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-------------------------|-------------------------|
| Name of Employer N/A | Occupation HOMEMAKER |
|-------------------------|-------------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 15 2019

Transaction ID : SA11A.610

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 64

| | | | |
|---|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12 | 13a | 13b | 14 |
| | | | 15 |

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
WRIGHT, STAN, , ,

Mailing Address P.O. BOX 914

| | | |
|------------------------|-------------|------------------------|
| City BAYOU LA BATRE | State AL | Zip Code 36509-0914 |
|------------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---------------------|
| Name of Employer WRIGHT BRAND OYSER | Occupation OWNER |
|--|---------------------|

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 11 / 15 / 2019 |

Transaction ID : SA11A.614

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
|-------------------------|

Amount of Each Receipt this Period

☐ Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
|-------------------------|

Amount of Each Receipt this Period

☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

| |
|----------|
| 1000.00 |
| 50785.00 |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 27 OF 64

| | | | |
|------------------------------|------------------------------|---|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | | | |

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

| | | | | |
|---|-------------|-------------------------------------|--|--|
| A. Full Name (Last, First, Middle Initial) ARPAC | | | Date of Receipt M M / D D / Y Y Y Y Y 10 / 17 / 2019 | |
| Mailing Address 451 FLORIDA STREET BANK ONE CENTRE N TOWER 19TH FLOOR | | | Transaction ID : SA11C.601 | |
| City BATON ROUGE | State LA | Zip Code 70801-1700 | Amount of Each Receipt this Period 2500.00 | |
| FEC ID number of contributing federal political committee. C C00226472 | | Name of Employer Occupation | | |
| Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 2500.00 | | |
| | | | <input type="checkbox"/> Memo Item CONTRIBUTION | |

| | | | | |
|---|-------|------------------------------------|--|--|
| B. Full Name (Last, First, Middle Initial) | | | Date of Receipt M M / D D / Y Y Y Y Y | |
| Mailing Address | | | | |
| City | State | Zip Code | | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period | | |
| Name of Employer Occupation | | <input type="checkbox"/> Memo Item | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ | | |

| | | | | |
|---|-------|------------------------------------|--|--|
| C. Full Name (Last, First, Middle Initial) | | | Date of Receipt M M / D D / Y Y Y Y Y | |
| Mailing Address | | | | |
| City | State | Zip Code | | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period | | |
| Name of Employer Occupation | | <input type="checkbox"/> Memo Item | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ | | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 2500.00 |
| TOTAL This Period (last page this line number only)..... | 2500.00 |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 OF 64

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Jerry Carl for Congress

A. Full Name (Last, First, Middle Initial)
Carl, Jerry, Lee, , Jr

Mailing Address PO Box 852138

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Mobile | AL | 36685 |

FEC ID number of contributing federal political committee. **C** C00697789

| | |
|------------------|---------------------|
| Name of Employer | Occupation |
| Mobile County | County Commissioner |

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 255000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 31 / 2019

Transaction ID : L123119

Amount of Each Receipt this Period

50000.00

☐ Memo Item
 Loan from Candidate

B. Full Name (Last, First, Middle Initial)

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

50000.00
 50000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 64

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. DORSETT, ANDREW, R, ,Mailing Address 130 DU RHU DRIVE
APT KCity
MOBILEState
ALZip Code
36608Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 31 | | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1286.89

Transaction ID : SB17.I112

☐ Memo Item OCTOBER PAYROLL

Full Name (Last, First, Middle Initial)

B. DORSETT, ANDREW, R, ,Mailing Address 130 DU RHU DRIVE
APT KCity
MOBILEState
ALZip Code
36608Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 15 | | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

102.29

Transaction ID : SB17.I124

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DORSETT, ANDREW, R, ,Mailing Address 130 DU RHU DRIVE
APT KCity
MOBILEState
ALZip Code
36608Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 29 | | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1629.99

Transaction ID : SB17.I136

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3019.17

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 64

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|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. DORSETT, ANDREW, R, ,Mailing Address 130 DU RHU DRIVE
APT KCity
MOBILEState
ALZip Code
36608Purpose of Disbursement
PAYROLL

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12 | 30 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1629.99

Transaction ID : SB17.I148

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DORSETT, ANDREW, R, ,Mailing Address 130 DU RHU DRIVE
APT KCity
MOBILEState
ALZip Code
36608Purpose of Disbursement
TRAVEL

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12 | 30 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

34.98

Transaction ID : SB17.I153

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KAISER, ANTHONY, P, ,

Mailing Address 160161 SAPPHIRE LN

City
FOLEYState
ALZip Code
36535Purpose of Disbursement
PAYROLL

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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| M M | D D | Y Y Y Y |
| 11 | 01 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1009.70

Transaction ID : SB17.I122

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2674.67

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 64

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|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a | 20b | 20c | 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. KAISER, ANTHONY, P, ,

Mailing Address 160161 SAPPHIRE LN

City
FOLEYState
ALZip Code
36535Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 11 | 29 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2067.06

Transaction ID : SB17.I137

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KAISER, ANTHONY, P, ,

Mailing Address 160161 SAPPHIRE LN

City
FOLEYState
ALZip Code
36535Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12 | 30 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2067.06

Transaction ID : SB17.I149

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KIDD, MARK, J, ,

Mailing Address 661 MERRITT DRIVE N

City
MOBILEState
ALZip Code
36609Purpose of Disbursement
CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 11 | 26 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

372.11

Transaction ID : SB17.I134

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4506.23

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 64

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|--|------------------------------|------------------------------|------------------------------|
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| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. KIDD, MARK, J, ,

Mailing Address 661 MERRITT DRIVE N

City
MOBILEState
ALZip Code
36609Purpose of Disbursement
CATERING

007

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 01 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1211.91

Transaction ID : SB17.I99

☐ Memo Item EVENT CATERING

Full Name (Last, First, Middle Initial)

B. WEIDLICH, ZACH, , ,

Mailing Address 763 GRAND BOULEVARD

City
CHICKASAWState
ALZip Code
36611Purpose of Disbursement
TRAVELCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 17 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

265.34

Transaction ID : SB17.I105

☐ Memo Item REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

C. WEIDLICH, ZACH, , ,

Mailing Address 763 GRAND BOULEVARD

City
CHICKASAWState
ALZip Code
36611Purpose of Disbursement
TRAVELCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 28 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

193.19

Transaction ID : SB17.I107

☐ Memo Item REIMBURSE TRAVEL
SUBTOTAL of Disbursements This Page (optional).....▶

1670.44

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 64

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| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a | 20b | 20c | 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. WEIDLICH, ZACH, , ,

Mailing Address 763 GRAND BOULEVARD

City
CHICKASAWState
ALZip Code
36611Purpose of Disbursement
PAYROLL

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 31 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2421.27

Transaction ID : SB17.I113

☐ Memo Item OCTOBER PAYROLL

Full Name (Last, First, Middle Initial)

B. WEIDLICH, ZACH, , ,

Mailing Address 763 GRAND BOULEVARD

City
CHICKASAWState
ALZip Code
36611Purpose of Disbursement
PAYROLL

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
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| M M | D D | Y Y Y Y |
| 11 | 29 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2421.27

Transaction ID : SB17.I138

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WEIDLICH, ZACH, , ,

Mailing Address 763 GRAND BOULEVARD

City
CHICKASAWState
ALZip Code
36611Purpose of Disbursement
PAYROLL

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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| M M | D D | Y Y Y Y |
| 12 | 30 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2421.27

Transaction ID : SB17.I150

☐ Memo Item
SUBTOTAL of Disbursements This Page (optional).....▶

7263.81

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 64

| | | | |
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| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. WEIDLICH, ZACH, , ,

Mailing Address 763 GRAND BOULEVARD

City
CHICKASAWState
ALZip Code
36611Purpose of Disbursement
TRAVEL

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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| M M | / | D D | / | Y Y Y Y |
| 12 | | 30 | | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

384.34

Transaction ID : SB17.I152

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. 92ND BUFFALO SOLDIERS ASSOCIATION

Mailing Address PO BOX 11191

City
CHICKASAWState
ALZip Code
36671Purpose of Disbursement
FOOD/BEVERAGECategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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| M M | / | D D | / | Y Y Y Y |
| 11 | | 26 | | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.I135

☐ Memo Item TABLE DINNER

Full Name (Last, First, Middle Initial)

C. ALABAMA DEPARTMENT OF REVENUE

Mailing Address PO Box 327480

City
MontgomeryState
ALZip Code
36132Purpose of Disbursement
PAYROLL TAXESCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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| M M | / | D D | / | Y Y Y Y |
| 10 | | 30 | | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

313.83

Transaction ID : SB17.I116

☐ Memo Item 3RD QUARTER STATE
WITHHOLDING**SUBTOTAL** of Disbursements This Page (optional).....▶

898.17

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 64

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| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. ALABAMA FEDERATION REPUBLICAN WOMEN

Mailing Address 3505 Lorna Road

City
BirminghamState
ALZip Code
35216

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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| 1 | 0 | | 1 | 7 | | 2 | 0 | 1 | 9 |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I101

☐ Memo Item SPONSORSHIP**B. ALABAMA PECAN FESTIVAL**

Mailing Address 5055 CAROL PLANTATION RD

City
MOBILEState
ALZip Code
36619Purpose of Disbursement
ADVERTISING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 3 | 1 | | 2 | 0 | 1 | 9 |

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.I119

☐ Memo Item**C. ANEDOT**Mailing Address 1920 MCKINNEY AVE
7TH FLOORCity
DALLASState
TXZip Code
75201Purpose of Disbursement
DATA PROCESSING SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 3 | 1 | | 2 | 0 | 1 | 9 |

FEC Identification Number

C

Amount of Each Disbursement this Period

491.90

Transaction ID : SB17.I154

☐ Memo Item CREDIT CARD PROCESSING FEE**SUBTOTAL** of Disbursements This Page (optional).....▶

1241.90

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 64

| | | | |
|--|------------------------------|------------------------------|------------------------------|
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| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. BETBEZE REALTY CO., INC.

Mailing Address 3345 HALLS MILL ROAD

City
MOBILEState
ALZip Code
36606Purpose of Disbursement
RENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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| M M | / | D D | / | Y Y Y Y |
| 10 | | 28 | | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.I106

☐ Memo Item RENT

Full Name (Last, First, Middle Initial)

B. BETBEZE REALTY CO., INC.

Mailing Address 3345 HALLS MILL ROAD

City
MOBILEState
ALZip Code
36606Purpose of Disbursement
RENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 01 | | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.I140

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BETBEZE REALTY CO., INC.

Mailing Address 3345 HALLS MILL ROAD

City
MOBILEState
ALZip Code
36606Purpose of Disbursement
RENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 01 | | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.I98

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 64

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD

City
VIENNAState
VAZip Code
22182Purpose of Disbursement
COMPUTER SUPPORT

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 10 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

900.00

Transaction ID : SB17.I118

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL ROAD

City
VIENNAState
VAZip Code
22182Purpose of Disbursement
DATA PROCESSING SERVICES

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 11 | 13 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

900.00

Transaction ID : SB17.I123

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL ROAD

City
VIENNAState
VAZip Code
22182Purpose of Disbursement
DATA PROCESSING SERVICES

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12 | 11 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

900.00

Transaction ID : SB17.I142

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2700.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 38 OF 64

☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. EBW DEVELOPMENT

Mailing Address 3260 BANKHEAD AVENUE

City
MONTGOMERY

State
AL

Zip Code
36106

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 16 / 2019

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.I103

☐ Memo Item SEPTEMBER AND OCTOBER

Full Name (Last, First, Middle Initial)

B. EBW DEVELOPMENT

Mailing Address 3260 BANKHEAD AVENUE

City
MONTGOMERY

State
AL

Zip Code
36106

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 15 / 2019

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.I125

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. EBW DEVELOPMENT

Mailing Address 3260 BANKHEAD AVENUE

City
MONTGOMERY

State
AL

Zip Code
36106

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 19 / 2019

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.I145

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

20000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 64

| | | | |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a | 20b | 20c | 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. HANCOCK WHITNEY BANK

Mailing Address PO BOX 23070

City
COLUMBUSState
GAZip Code
31902Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 17 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1244.99

Transaction ID : SB17.I102

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ALABAMA POWER

Mailing Address PO Box 242

City
BirminghamState
ALZip Code
35292Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 15 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

531.67

Transaction ID : SB17.I159

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. ALABAMA POLICY INSTITUTEMailing Address 2213 MORRIS AVE
F1City
BIRMINGHAMState
ALZip Code
35203Purpose of Disbursement
DONATION

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 15 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

525.00

Transaction ID : SB17.I160

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1244.99

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 64

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|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. HALF SHELL OYSTER HOUSE

Mailing Address 3654 AIRPORT BLVD

City
MOBILEState
ALZip Code
36608Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 15 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.I156

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. KEITH MAP SERVICE

Mailing Address 60 SCHILLINGER RD N #5

City
MOBILEState
ALZip Code
36608Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 15 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

22.00

Transaction ID : SB17.I155

☒ Memo Item MAPS

Full Name (Last, First, Middle Initial)

C. LOT 203

Mailing Address 203 CHURCH ST

City
MOBILEState
ALZip Code
36602Purpose of Disbursement
PARKING SVC

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 15 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

8.00

Transaction ID : SB17.I158

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 64

| | | | |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a | 20b | 20c | 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. MELLOW MUSHROOM

Mailing Address 2409 SCHILLINGER RD S

City
MOBILEState
ALZip Code
36695Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 15 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

118.32

Transaction ID : SB17.I157

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. NORTH BALDWIN CHAMBER OF COMMERCE

Mailing Address 301 MCMEANS AVE

City
BAY MINETTEState
ALZip Code
36507Purpose of Disbursement
REGISTRATION FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 15 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.I161

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. HANCOCK WHITNEY BANK

Mailing Address PO BOX 23070

City
COLUMBUSState
GAZip Code
31902Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 11 | 20 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

9.00

Transaction ID : SB17.I131

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

9.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 64

| | | | |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a | 20b | 20c | 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. HANCOCK WHITNEY BANK

Mailing Address PO BOX 23070

City
COLUMBUSState
GAZip Code
31902Purpose of Disbursement
BANK FEE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12 | 20 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

16.00

Transaction ID : SB17.I147

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HANCOCK WHITNEY BANK

Mailing Address PO BOX 23070

City
COLUMBUSState
GAZip Code
31902Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 11 | 15 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1936.41

Transaction ID : SB17.I162

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ALABAMA POWER

Mailing Address PO Box 242

City
BirminghamState
ALZip Code
35292Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 16 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

347.24

Transaction ID : SB17.I174

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1952.41

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 64

| | | | |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a | 20b | 20c | 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. CITGO

Mailing Address 10510 PADGETT SWITCH RD

City
IRVINGTONState
ALZip Code
36544Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 01 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

28.76

Transaction ID : SB17.I163

☒ Memo Item**B. COMCAST**

Mailing Address 1225 Satchel Paige Dr

City
MobileState
ALZip Code
36606Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 03 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

156.90

Transaction ID : SB17.I165

☒ Memo Item**C. COMCAST**

Mailing Address 1225 Satchel Paige Dr

City
MobileState
ALZip Code
36606Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 16 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

166.90

Transaction ID : SB17.I173

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 64

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. COMCAST

Mailing Address 1225 Satchel Paige Dr

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 18 | 2019 |

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Mobile | AL | 36606 |

FEC Identification Number

C

Purpose of Disbursement
UTILITIES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

166.90

Transaction ID : SB17.I176

☒ Memo Item

| | | |
|----------------|-----------|--|
| Office Sought: | House | Disbursement For: 2020 |
| | Senate | |
| | President | |
| State: | District: | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

Full Name (Last, First, Middle Initial)

B. FEDEX OFFICEMailing Address 3691 AIRPORT BLVD
SUITE C

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 25 | 2019 |

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| MOBILE | AL | 36608 |

FEC Identification Number

C

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5.40

Transaction ID : SB17.I178

☒ Memo Item

| | | |
|----------------|-----------|--|
| Office Sought: | House | Disbursement For: 2020 |
| | Senate | |
| | President | |
| State: | District: | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

Full Name (Last, First, Middle Initial)

C. KWIK KOPYSHOP

Mailing Address 448 S LAWRENCE ST

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 21 | 2019 |

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| MONTGOMERY | AL | 36104 |

FEC Identification Number

C

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

517.51

Transaction ID : SB17.I177

☒ Memo Item

| | | |
|----------------|-----------|--|
| Office Sought: | House | Disbursement For: 2020 |
| | Senate | |
| | President | |
| State: | District: | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 64

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. LIGHTHOUSE RESTAURANT

Mailing Address 12495 COUNTY RD 23

City
IRVINGTONState
ALZip Code
36544Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 17 | | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

258.60

Transaction ID : SB17.I175

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. LOWES

Mailing Address 151 EAST I 65 SERVICE RD S

City
MOBILEState
ALZip Code
36606Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 16 | | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

17.03

Transaction ID : SB17.I172

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. MINUTE KEY, INC.

Mailing Address 101 EAST I65 SERVICE RD S

City
MOBILEState
ALZip Code
36606Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 14 | | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

4.42

Transaction ID : SB17.I169

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 46 OF 64

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. PUBLIX SUPERMARKETS

Mailing Address 4628 AIRPORT BLVD

City
MOBILEState
ALZip Code
36608Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 07 | | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

55.74

Transaction ID : SB17.I167

☒ Memo Item**B. R BISTRO**

Mailing Address 334 FAIRHOPE AVE

City
FAIRHOPEState
ALZip Code
36532Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 11 | | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

20.55

Transaction ID : SB17.I168

☒ Memo Item**C. SHELL**

Mailing Address 315 W LEE ST

City
CHICKASAWState
ALZip Code
36611Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 07 | | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

11.00

Transaction ID : SB17.I166

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 47 OF 64

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. SHELL

Mailing Address 315 W LEE ST

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 14 | | 2019 |

City
CHICKASAWState
ALZip Code
36611Purpose of Disbursement
TRAVEL

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

7.55

Transaction ID : SB17.I170

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. SUGAR RUSH

Mailing Address 13240 NORTH WINTZELL AVE

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 01 | | 2019 |

City
BAYOU LA BATREState
ALZip Code
36509Purpose of Disbursement
FOOD/BEVERAGE

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

47.25

Transaction ID : SB17.I164

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. SUGAR RUSH

Mailing Address 13240 NORTH WINTZELL AVE

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 14 | | 2019 |

City
BAYOU LA BATREState
ALZip Code
36509Purpose of Disbursement
FOOD/BEVERAGE

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

31.87

Transaction ID : SB17.I171

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 48 OF 64

| | | | |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a | 20b | 20c | 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. WALMART

Mailing Address 101 EAST I65 SERVICE RD S

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 25 | 2019 |

City
MOBILEState
ALZip Code
36606Purpose of Disbursement
OFFICE SUPPLIES

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

92.79

Transaction ID : SB17.I179

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. HANCOCK WHITNEY BANK

Mailing Address PO BOX 23070

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12 | 12 | 2019 |

City
COLUMBUSState
GAZip Code
31902Purpose of Disbursement
CREDIT CARD PAYMENT

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2577.56

Transaction ID : SB17.I180

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. ABC SIGNS

Mailing Address 5851 LARUE STEINER RD

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 11 | 22 | 2019 |

City
THEODOREState
ALZip Code
36582Purpose of Disbursement
PRINTING

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1732.50

Transaction ID : SB17.I187

☒ Memo Item SIGNS

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

2577.56

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 49 OF 64

☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. ALABAMA POWER

Mailing Address PO Box 242

City
Birmingham

State
AL

Zip Code
35292

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 11 / 2019

FEC Identification Number

C

Amount of Each Disbursement this Period

173.46

Transaction ID : SB17.I183

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. EASTERN SHORE CHAMBER

Mailing Address 327 FAIRHOPE AVE

City
FAIRHOPE

State
AL

Zip Code
36532

Purpose of Disbursement
REGISTRATION FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 07 / 2019

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.I182

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. GOOGLE VOICE

Mailing Address 1600 Amphitheatre Pkwy

City
Mountain View

State
CA

Zip Code
94043

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 01 / 2019

FEC Identification Number

C

Amount of Each Disbursement this Period

10.00

Transaction ID : SB17.I181

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 64

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. KWIK KOPYSHOP

Mailing Address 448 S LAWRENCE ST

City
MONTGOMERYState
ALZip Code
36104Purpose of Disbursement
PRINTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | | 1 | 5 | | 2 | 0 | 1 | 9 |

FEC Identification Number

C

Amount of Each Disbursement this Period

477.20

Transaction ID : SB17.I185

☒ Memo Item**B. OFFICE DEPOT**

Mailing Address 3930A Airport Blvd

City
MobileState
ALZip Code
36608Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | | 2 | 1 | | 2 | 0 | 1 | 9 |

FEC Identification Number

C

Amount of Each Disbursement this Period

113.30

Transaction ID : SB17.I186

☒ Memo Item**C. R BISTRO**

Mailing Address 334 FAIRHOPE AVE

City
FAIRHOPEState
ALZip Code
36532Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | | 1 | 5 | | 2 | 0 | 1 | 9 |

FEC Identification Number

C

Amount of Each Disbursement this Period

41.10

Transaction ID : SB17.I184

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 51 OF 64

| | | | |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a | 20b | 20c | 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. HOLTZMAN VOGEL JOSEFIK TORCHINSKY PLLCMailing Address 45 NORTH HILL DRIVE
SUITE 100City
WARRENTONState
VAZip Code
20186Purpose of Disbursement
LEGAL CONSULTING

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 28 | | | 2019 | | | |

FEC Identification Number

C

Amount of Each Disbursement this Period

181.25

Transaction ID : SB17.I110

☐ Memo Item LEGAL

Full Name (Last, First, Middle Initial)

B. HOLTZMAN VOGEL JOSEFIK TORCHINSKY PLLCMailing Address 45 NORTH HILL DRIVE
SUITE 100City
WARRENTONState
VAZip Code
20186Purpose of Disbursement
LEGAL CONSULTING

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 11 | | | 26 | | | 2019 | | | |

FEC Identification Number

C

Amount of Each Disbursement this Period

181.25

Transaction ID : SB17.I133

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. I360, LLC

Mailing Address 29374 NETWORK PLACE

City
CHICAGOState
ILZip Code
60673Purpose of Disbursement
UTIL

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 28 | | | 2019 | | | |

FEC Identification Number

C

Amount of Each Disbursement this Period

1119.66

Transaction ID : SB17.I109

☐ Memo Item TELEPHONE
SUBTOTAL of Disbursements This Page (optional).....▶

1482.16

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 64

| | | | |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a | 20b | 20c | 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. I360, LLC

Mailing Address 29374 NETWORK PLACE

City
CHICAGOState
ILZip Code
60673Purpose of Disbursement
COMPUTER SUPPORT

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 11 | 15 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1231.98

Transaction ID : SB17.I126

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. I360, LLC

Mailing Address 29374 NETWORK PLACE

City
CHICAGOState
ILZip Code
60673Purpose of Disbursement
COMPUTER SUPPORT

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12 | 19 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1180.72

Transaction ID : SB17.I146

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. INTUIT, INC.

Mailing Address 2700 COAST AVE

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
PAYROLL SVCCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 31 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3.50

Transaction ID : SB17.I114

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2416.20

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 53 OF 64

| | | | |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a | 20b | 20c | 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. INTUIT, INC.

Mailing Address 2700 COAST AVE

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
BANK FEE

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 11 | 01 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.I121

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INTUIT, INC.

Mailing Address 2700 COAST AVE

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
PAYROLL SVC

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 11 | 29 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

5.25

Transaction ID : SB17.I139

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. INTUIT, INC.

Mailing Address 2700 COAST AVE

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
BANK FEE

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12 | 30 | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

5.25

Transaction ID : SB17.I151

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

12.25

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 54 OF 64

| | | | |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a | 20b | 20c | 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. LAKESIDE COMMUNICATIONS

Mailing Address 90 HALLIGAN AVE

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12 | 18 | 2019 |

City
WORTHINGTONState
OHZip Code
43085

FEC Identification Number

C

Purpose of Disbursement
AUDIO/VISUAL SVC

004

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

48692.50

Transaction ID : SB17.I143

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

B. LUNA'S EAT & DRINK

Mailing Address PO BOX 1972

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 31 | 2019 |

City
ORANGE BEACHState
ALZip Code
36561

FEC Identification Number

C

Purpose of Disbursement
CATERING

007

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

1382.70

Transaction ID : SB17.I120

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

C. NAMAN'S CATERING

Mailing Address P.O. BOX 50177

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 11 | 20 | 2019 |

City
MOBILEState
ALZip Code
36605

FEC Identification Number

C

Purpose of Disbursement
CATERING

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

765.60

Transaction ID : SB17.I130

☐ Memo Item

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

50840.80

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 64

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. PUBLIC OPINION STRATEGIES, LLC

Mailing Address 214 NORTH FAYETTE ST

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

005

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | | 1 | 5 | | 2 | 0 | 1 | 9 |

FEC Identification Number

C

Amount of Each Disbursement this Period

20000.00

Transaction ID : SB17.I128

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SARALAND CIVIC FORUM

Mailing Address PO BOX 462

City
SARALANDState
ALZip Code
36571Purpose of Disbursement
ADVERTISING

004

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 5 | | 2 | 0 | 1 | 9 |

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.I141

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRATEGIC IMPACTMailing Address 333 WEST VINE STREET
SUITE 300City
LEXINGTONState
KYZip Code
40507Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 1 | 7 | | 2 | 0 | 1 | 9 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.I104

☐ Memo Item OCTOBER**SUBTOTAL** of Disbursements This Page (optional).....▶

22530.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 56 OF 64

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. STRATEGIC IMPACTMailing Address 333 WEST VINE STREET
SUITE 300City
LEXINGTONState
KYZip Code
40507Purpose of Disbursement
MEDIA

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 9 |

FEC Identification Number

C

Amount of Each Disbursement this Period

7950.00

Transaction ID : SB17.I108

☐ Memo Item HANDOUTS AND DOOR HANGERS
B. STRATEGIC IMPACTMailing Address 333 WEST VINE STREET
SUITE 300City
LEXINGTONState
KYZip Code
40507Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | | 1 | 5 | | 2 | 0 | 1 | 9 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.I127

☐ Memo Item
C. STRATEGIC IMPACTMailing Address 333 WEST VINE STREET
SUITE 300City
LEXINGTONState
KYZip Code
40507Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 1 | 9 | | 2 | 0 | 1 | 9 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.I144

☐ Memo Item
SUBTOTAL of Disbursements This Page (optional).....▶

12950.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 64

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. THE PROSPER GROUPMailing Address 150 WEST MARKET ST.
SUITE 500City
INDIANAPOLISState
INZip Code
46204Purpose of Disbursement
WEBSITE SETUP

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 9 |

FEC Identification Number

C

Amount of Each Disbursement this Period

139.43

Transaction ID : SB17.I111

☐ Memo Item EMAIL PLATFORM

Full Name (Last, First, Middle Initial)

B. THE PROSPER GROUPMailing Address 150 WEST MARKET ST.
SUITE 500City
INDIANAPOLISState
INZip Code
46204Purpose of Disbursement
ONLINE ADVERTISING

004

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | | 1 | 8 | | 2 | 0 | 1 | 9 |

FEC Identification Number

C

Amount of Each Disbursement this Period

7150.00

Transaction ID : SB17.I129

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THE PROSPER GROUPMailing Address 150 WEST MARKET ST.
SUITE 500City
INDIANAPOLISState
INZip Code
46204Purpose of Disbursement
EMAIL PLATFORMCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | | 2 | 6 | | 2 | 0 | 1 | 9 |

FEC Identification Number

C

Amount of Each Disbursement this Period

146.13

Transaction ID : SB17.I132

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7435.56

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 64

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. UNITED STATES TREASURY

Mailing Address Department of Treasury

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 30 | | 2019 |

City
OgdenState
UTZip Code
84201-0005Purpose of Disbursement
PAYROLL TAXES

003

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

1089.00

Transaction ID : SB17.I115

☐ Memo Item 941 PAYROLL TAXES

State:

District:

Full Name (Last, First, Middle Initial)

B. UNITED STATES TREASURY

Mailing Address Department of Treasury

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 15 | | 2019 |

City
OgdenState
UTZip Code
84201-0005Purpose of Disbursement
PAYROLL TAXESCategory/
Type

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

1007.88

Transaction ID : SB17.I117

☐ Memo Item 941 OCTOBER

State:

District:

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 1776 WILSON BLVD
SUTIE 530

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 31 | | 2019 |

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
DATA PROCESSING SERVICESCategory/
Type

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

78.54

Transaction ID : SB17.I188

☐ Memo Item CREDIT CARD PORCESSING FEES

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

2175.42

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 64

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Jerry Carl for Congress

Full Name (Last, First, Middle Initial)

A. ALGOP

Mailing Address 3505 LORNA ROAD

City
BIRMINGHAMState
ALZip Code
35216Purpose of Disbursement
BALLOT ACCESS FEE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 09 | | 2019 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3480.00

Transaction ID : SB17.I100

☐ Memo Item CANDIDATE QUALIFYING

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| | | | | |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| | | | | |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item
SUBTOTAL of Disbursements This Page (optional).....▶

3480.00

TOTAL This Period (last page this line number only).....▶

156080.74

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 60 OF 64

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Jerry Carl for Congress

Transaction ID : 10

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Carl, Jerry, Lee, , Jr

Election: 2020

☒ Primary Bank Loan☐ General☐ Other (specify) ▼Mailing Address
PO Box 852138

City

State

ZIP Code

Mobile

AL

36685

☐ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

200000.00

0.00

200000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03 M

D 29 D

Y 2019 Y

M M

D D

Y None Y

5.75 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

200000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 61 OF 64

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Jerry Carl for Congress

Transaction ID : L1006

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Carl, Jerry, Lee, , Jr

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO Box 852138

City

State

ZIP Code

Mobile

AL

36685

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

105000.00

0.00

105000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 06 M /

D 28 D /

Y 2019 Y

M M /

D D /

Y None Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

105000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 62 OF 64

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Jerry Carl for Congress

Transaction ID : L1006_B

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Carl, Jerry, Lee, , Jr

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO Box 852138

City

State

ZIP Code

Mobile

AL

36685

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

100000.00

0.00

100000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 09 M

D 30 D

Y 2019 Y

M M

D D

Y None Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

100000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 63 OF 64

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Jerry Carl for Congress

Transaction ID : L1006_B_B

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Carl, Jerry, Lee, , Jr

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO Box 852138

City

State

ZIP Code

Mobile

AL

36685

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

50000.00

0.00

50000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 09 M

D 30 D

Y 2019 Y

M M

D D

Y None Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

50000.00

TOTALS This Period (last page in this line only).....▶

455000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3) **LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Supplementary for
Information found on
Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463

| | | | | | | | | | | | | |
|--|--|-------|---------------------|---|-------------|---|--|---|--|--|--|--|
| NAME OF COMMITTEE (In Full) Jerry Carl for Congress | | | Transaction ID : 11 | | | FEC IDENTIFICATION NUMBER C C00697789 | | | | | | |
| LENDING INSTITUTION (LENDER) Full Name Hancock Whitney | | | | Amount of Loan <div style="border: 1px solid black; padding: 2px; text-align: right;">200000.00</div> | | | | Interest Rate (APR) <div style="border: 1px solid black; padding: 2px; text-align: right;">5.75 %</div> | | | | |
| Mailing Address 25 N Beltline Highway | | | | Date Incurred or Established MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; text-align: right;">03 / 29 / 2019</div> | | | | Date Due MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; text-align: right;">10 / 02 / 2020</div> | | | | |
| City | | State | Zip Code | | Back Ref 10 | | | | | | | |
| Mobile | | AL | 36608-9999 | | | | | | | | | |
| A. Has loan been restructured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; text-align: right;">11 / 19 / 2018</div> | | | | | | | | | | | | |
| B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; padding: 2px; text-align: right;">200000.00</div> | | | | Total Outstanding Balance: <div style="border: 1px solid black; padding: 2px; text-align: right;">200000.00</div> | | | | | | | | |
| C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Schedule C.) | | | | | | | | | | | | |
| D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____ | | | | | | | | What is the value of this collateral? <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> Does the lender have a perfected security interest in it? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | |
| E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____ | | | | | | | | What is the estimated value? <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> | | | | |
| A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established: MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> | | | | | | | | Location of account: Address: _____ City, State, Zip: _____ | | | | |
| F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment. | | | | | | | | | | | | |
| G. COMMITTEE TREASURER Typed Name Frenkel, Ceresa, M, , Signature _____ | | | | | | | | DATE MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; text-align: right;">04 / 15 / 2019</div> | | | | |
| H. Attach a signed copy of the loan agreement. | | | | | | | | | | | | |
| I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan. | | | | | | | | | | | | |
| AUTHORIZED REPRESENTATIVE Typed Name Baldwin, Justin, , , Signature Baldwin, Justin, , , | | | | | | [Electronically Filed] | | DATE MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; text-align: right;">04 / 15 / 2019</div> | | | | |
| | | | | | | Title Commercial Banking | | | | | | |